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APPLICANTS

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** CONTINUING DATA *****
none

** FOREIGN APPLICATIONS *****
none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/21/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 4	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
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35 USC 119 (a-d) conditions met
☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged
 Examiner's Signature: *[Signature]* Initials: *[Initials]*

ADDRESS
 26902
 DEPARTMENT OF THE AIR FORCE
 AFMC LO/JAZ
 2240 B ST., RM. 100
 WRIGHT-PATTERSON AFB, OH
 45433-7109

TITLE
 Downconvert and average identification of biphase coded signal carrier

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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